

Clavicle Fracture

What is a clavicle fracture?

A clavicle fracture is a break in the bone commonly known as the collarbone. It is an S-shaped bone in your shoulder that connects the sternum (breastbone) to the scapula (shoulder blade), helping to support your shoulder joint. It is a common injury in athletes, especially those participating in contact sports, due to its shape, location, and lack of protection. These fractures account for approximately 5-10% of all fractures, making it one of the most frequently broken bones in the body.

What are the symptoms of a clavicle fracture?

Symptoms of a clavicle fracture can vary for each individual, but may include:

- ✓ Inability or unwillingness to use affected arm.
- ✓ Swelling, bruising or deformity along the collarbone.
- ✓ Pain when touched at a specific spot on the collarbone.
- ✓ Pain that typically does not resolve with Advil or ibuprofen.



How is it diagnosed?

The only way to definitively diagnose a clavicle fracture is to obtain an x-ray. Usually, your doctor will order several views of the clavicle to determine if a fracture is present, as well as to assess alignment and healing potential of the bone.

How do we treat it?

Under most circumstances, a clavicle fracture in a child does not require surgery. Using a sling for comfort is the preferred treatment and is typically used for a total of 4-6 weeks. Due to the location of the clavicle, a cast cannot be used for this type of fracture, however it is critical to keep the arm as immobilized as possible while the bone heals. For the first 2 weeks, sling wear is required full time, except for sleeping and bathing. After 4 weeks, the sling can usually be removed while at home and when performing gentle exercises provided by your physician. The sling should still be worn at school or while outdoors, until otherwise cleared. Your doctor will likely require 2-3 follow-up appointments to get repeat x-rays and ensure appropriate healing. This injury typically does not require any formal physical therapy, however home exercises focusing on range of motion and strength may be provided. Return to play is typically 6-10 weeks after the injury; younger athletes may be able return sooner due to greater healing potential. In some cases, a small bony prominence on the collarbone may be permanently visible where the bone has healed, however this should cause no issues or pain.

References:

Children's Hospital Colorado Sports Medicine Program for young athletes
American Academy of Pediatrics
American Medical Society of Sports Medicine